Fill in this information to identify your case:	
United States Bankruptcy Court for the:  Northern District of OH	
	Chapter you are filing under:
Case number (If known):	Chapter 7  Chapter 11
	Chapter 12 Chapter 13

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Dina First name	First name
	passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Coleman-Deal Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or federal	xxx - xx - 6 2 1 3	XXX - XX
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Voluntary Petition for Individuals Filing for Bankruptcy

Dehtor	1	

Middle Name

Coleman-Deal

Case number (if known)\_

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	Business name  Business name  Business name	☐ I have not used any business names or EINs.  Business name  Business name  EIN	
		EIN	EIN	
5.	Where you live	642 E 128  Number Street	If Debtor 2 lives at a different address:	
		Cleveland OH 44108		
		City State ZIP Code  Cuyahoga County	City State ZIP Code  County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number Street	Number Street	
		P.O. Box	P.O. Box	
		City State ZIP Code	City State ZIP Code	
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

	-	•
-		-

#### **Tell the Court About Your Bankruptcy Case**

7.	The chapter of the Bankruptcy Code you are choosing to file under	for Bank	ck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing ankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13				
8.	How you will pay the fee	local your subn with  I nee Appl  I req By la less pay	Il pay the entire fee when I file my petition. Please check with the clerk's office in your all court for more details about how you may pay. Typically, if you are paying the fee irself, you may pay with cash, cashier's check, or money order. If your attorney is imitting your payment on your behalf, your attorney may pay with a credit card or check in a pre-printed address.  The details are installments. If you choose this option, sign and attach the indication for Individuals to Pay The Filing Fee in Installments (Official Form 103A).  The details are that my fee be waived (You may request this option only if you are filing for Chapter 7. It was a judge may, but is not required to, waive your fee, and may do so only if your income is a than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the				
9.	Have you filed for bankruptcy within the last 8 years?	■ No	District Who	en	Case number  Case number  Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.		en MM/DD/YYYY	Relationship to you Case number, if known Relationship to you Case number, if known		
11.	Do you rent your residence?	☐ No. ☐ Yes.	Go to line 12.  Has your landlord obtained an eviction ju  No. Go to line 12.  Yes. Fill out <i>Initial Statement About a</i> part of this bankruptcy petition.				

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

$\square$	٦h	to	r	1

Coleman-Deal Dina First Name Middle Name

Case number (if known)\_

of any full or nort time	No. Go to Part 4.				
of any full- or part-time business?	☐ Yes	Name and location of bus	iness		
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any  Number Street			
If you have more than one					
sole proprietorship, use a separate sheet and attach it to this petition.					
to this petition.		City		State	ZIP Code
		Check the appropriate bo	x to describe your business:		
		☐ Health Care Business	(as defined in 11 U.S.C. § 1	01(27A))	
		☐ Single Asset Real Est	ate (as defined in 11 U.S.C.	§ 101(51B)	)
		Stockbroker (as define	ed in 11 U.S.C. § 101(53A))		
		_	s defined in 11 U.S.C. § 101	(6))	
		☐ None of the above			
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	any of t ■ No. □ No.	hese documents do not exing a mot filing under Chape I am filing under Chapter the Bankruptcy Code.	st, follow the procedure in 1 ster 11. 11, but I am NOT a small bu	I U.S.C. §	tor according to the definition in
	☐ Yes	I am filing under Chapter Bankruptcy Code.	11 and I am a small busines	s debtor ac	cording to the definition in the
Report if You Own  Do you own or have any	or Have	Any Hazardous Prope	rty or Any Property Tha	nt Needs	Immediate Attention
property that poses or is		. What is the hazard?			
	t and				
alleged to pose a threat of imminent and	■ res				
alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	■ res				
alleged to pose a threat of imminent and identifiable hazard to public health or safety?	<b>u</b> res		needed, why is it needed? _		
alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	<b>J</b> les		needed, why is it needed? _		

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

City

page 4

ZIP Code

State

Part 5:

Dina

Coleman-Deal

Case number (if known)\_

ame Middle Name

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

 ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Coleman-Deal

Middle Name

Case number (if known)\_

Pa	art 6: Answer These Ques	stions for Reporting Purpose	s			
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	you nave:	<ul><li>No. Go to line 16b.</li><li>■ Yes. Go to line 17.</li></ul>				
			y business debts? Business debts estment or through the operation of the			
		<ul><li>□ No. Go to line 16c.</li><li>□ Yes. Go to line 17.</li></ul>				
		16c. State the type of debts you c	owe that are not consumer debts or bus	siness debts.		
17.	Are you filing under Chapter 7?	□ No. I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	excluded and administrative expenses	■ No □ Yes				
	are paid that funds will be available for distribution to unsecured creditors?	□ Yes				
18.	How many creditors do you estimate that you	■ 1-49 □ 50-99	☐ 1,000-5,000 ☐ 5,001-10,000	25,001-50,000 50,001-100,000		
	owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000		
19.	How much do you estimate your assets to	\$0-\$50,000 \$50,001-\$100,000	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion		
	be worth?	□ \$100,001-\$500,000 □ \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$10,000,000,001-\$50 billion □ More than \$50 billion		
20.	How much do you estimate your liabilities	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	to be?	\$50,001-\$100,000 \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion		
Pa	rt 7: Sign Below	□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion		
	or you	I have examined this petition, and correct.	d I declare under penalty of perjury that	the information provided is true and		
C		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with	n the chapter of title 11, United States C	Code, specified in this petition.		
			t in fines up to \$250,000, or imprisonme	g money or property by fraud in connection ent for up to 20 years, or both.		
		/s/ Dina Coleman-Deal	×			
		Signature of Debtor 1	Signatur	e of Debtor 2		

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Executed on

Executed on 01/18/2019 MM / DD / YYYY

page 6

MM / DD /YYYY

Del	<b>h</b> or	1

Dina

Coleman-Deal

Middle Name

Last Name

Case number (if known)\_\_

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Allen C Hufford	Date	01/18/2019
Signature of Attorney for Debtor		MM / DD /YYYY
Allen C Hufford		
Printed name		
Law Offices of Allen C Hufford Firm name		
22408 Lakeshore Blvd		
Number Street		
Euclid City	OH State	4123 ZIP Code
Contact phone (216) 264-0322	Email address	achlawfirm@gmail.com
0075398	OH	_
Bar number	State	

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Fill in this information to identify your case:					
Debtor 1	Dina First Name	Middle Name	Coleman-Deal		
Debtor 2 (Spouse, if filing)		Middle Name	Last Name		
	Bankruptcy Court for the:	Northern	District of Ohio		
Case number	(If known)		(State)		

☐ Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ 22,500.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>2,669.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ 25,169.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$ 75,149.55
Your total liabilities	\$ <u>75,149.55</u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$ <u>1,274.57</u>
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$ <u>1,226.00</u>

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1

Part 4:

Dina

Coleman-Deal

Case number (if known)\_

#### Answer These Questions for Administrative and Statistical Records

6.	Are vou	filing for	bankruptc	y under Cha	pters 7. 1	1. or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

#### 7. What kind of debt do you have?

■ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 1,051.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$_0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_0.00
9d. Student loans. (Copy line 6f.)	\$ 50,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$_0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$_50,000.00

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 2 of 2

Fill in this information to identify your case and this filing:				
Debtor 1	Dina First Name	Middle Name	Coleman-Deal	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Ohio (State)	
Case number			_	

☐ Check if this is an amended filing

## Official Form 106A/B

## Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building,	Land, or Other Real Estate You Own or Hav	e an Interest In	
<ol> <li>Do you own or have any legal or equitable interest</li> <li>No. Go to Part 2.</li> </ol>	st in any residence, building, land, or similar prope	erty?	
Yes. Where is the property?  1.1. 642 E 128 Street address, if available, or other description  Cleveland OH 44108 City State ZIP Code  Cuyahoga County	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$ 22,500.00  Describe the nature of interest (such as feethe entireties, or a life.)  Fee Simple  Check if this is considered as local.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$22,500.00  of your ownership simple, tenancy by e estate), if known.
If you own or have more than one, list here:  1.2.  Street address, if available, or other description	property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Describe the nature of interest (such as fee the entireties, or a life.  Check if this is co (see instructions)	simple, tenancy by e estate), if known.
	Other information you wish to add about this iter property identification number:	m, such as local	

	First Name Middle Name Last N	lame		
1.3.	Street address, if available, or other description	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
		☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
		☐ Investment property	Danasilaa Alaa saakssaa	£
	City State ZIP Co	de	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only		
		☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
		Other information you wish to add about this ite property identification number:		
		property identification number.		
		or all of your entries from Part 1, including any entries		\$22,500.00
you h	nave attached for Part 1. Write that numb	er here	→	
	l Baradha Vara Vakista			
Part 2:	Describe Your Vehicles			
•	, vans, trucks, tractors, sport utility vehic	hicle, also report it on Schedule G: Executory Contracts of Cles, motorcycles	and Unexpired Leases.	
3.1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
3.1.	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
		Debtor 2 only		, , ,
	Year:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	lacksquare At least one of the debtors and another	chare property.	portion you omin
	Other information:		\$	\$
		☐ Check if this is community property (see instructions)	<del></del>	<u> </u>
If you	own or have more than one, describe here			
ıı you				
3.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:	☐ Debtor 1 only☐ Debtor 2 only	Creditors Who Have Clain	
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:	. a roads one of the abbition and another		
		☐ Check if this is community property (see instructions)	\$	\$

Case number (if known)\_

Debtor 1

Dina

Coleman-Deal

Debtor 1		Coleman-Deal Case number (if k	known)	
3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	Creditors Who Have Clair	
	Year:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:	— At least one of the desitors and another		
		☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Year:	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	$\square$ At least one of the debtors and another	,	
	Other information:	Check if this is community property (see instructions)	\$	\$
4.1.	Make:	Who has an interest in the property? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see instructions)	\$	\$
If you	own or have more than one, list h	ere:		
4.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Other information:	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?
		At least one of the debtors and another		
			\$	
		☐ Check if this is community property (see instructions)	,	\$
				\$
				\$
			s for pages	\$ 0.00

Case number	(if known)				
-------------	------------	--	--	--	--

#### Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
No Furniture and Appliances	
Yes. Describe	\$2,000.00
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
U No	
Yes. Describe	\$ 350.00
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
■ No	
☐ Yes. Describe	\$
	Ψ
9. Equipment for sports and hobbies	
<i>Examples</i> : Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
and kayaks; carpentry tools; musical instruments	
■ No	
Yes. Describe	\$
10. Firearms	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
■ No	
Yes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
□ No	
Yes. Describe Clothes	\$ 200.00
<b>—</b> 1000 <b>—</b> 3000 <b>—</b>	\$ <u>200.00</u>
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
gold, silver	
□ No	
Yes. Describe	\$ 50.00
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	
. □ No	
☐ Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	
■ No	
☐ Yes. Give specific	•
information	\$
15. Add the dellar value of all of your entries from Part 2, including any entries for pages you have attached	
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$_2,600.00
ioi raito, white that humber here	

Case numb	er (if known)	)

#### Part 4: Describe Your Financial Assets

Do yo	u own or have any lo	egal or equitable interest in a	nny of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
		ave in your wallet, in your hom	e, in a safe deposit box, and on hand when you file	your petition	
	Yes			Cash:	\$_1.00
Exa	and other sin		nts; certificates of deposit; shares in credit unions, l ultiple accounts with the same institution, list each.	orokerage houses,	
	No Yes		Institution name:		
		17.1. Checking account:	Ohio Educational Credit Union		\$ <u>65.00</u>
		17.2. Checking account:			\$
		17.3. Savings account:	Ohio Educational Credit Union		\$ 3.00
		17.4. Savings account:			\$
		17.5. Certificates of deposit:			\$
		17.6. Other financial account:			\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
Exa		or publicly traded stocks nvestment accounts with broke	erage firms, money market accounts		
	Yes	Institution or issuer name:			
					\$
					\$
					\$
	n-publicly traded sto LLC, partnership, a		ated and unincorporated businesses, including	an interest in	
	No	Name of entity:	9/	6 of ownership:	
	Yes. Give specific information about			%	\$
	them				\$
				%	\$

Debtor 1	

Dina		Coleman-Deal	
First Name	Middle Name	Last Name	

Case number (if kn	own)

20.	Negotiable instruments i	nclude personal chec	er negotiable and non-negotiable instruments ks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.	
	<ul><li>■ No</li><li>□ Yes. Give specific</li></ul>	Issuer name:		
	information about them			\$
				\$
				\$
21.	Retirement or pension Examples: Interests in IF		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:		\$
		Pension plan:		\$
		IRA:		
				\$
		Retirement account:		\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
	Examples: Agreements of companies, or others		ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	
	■ No □ Yes	Inc	titution name or individual:	
	<b>—</b> res	Electric:	ululion name of individual.	
		Gas:		\$
		Heating oil:		\$
			tal unit:	\$
		Prepaid rent:		\$ \$
		Telephone:		\$ \$
		Water:		\$
		Rented furniture:		\$
		Other:		\$
23.	Annuities (A contract for	a periodic payment c	of money to you, either for life or for a number of years)	
	No			
	☐ Yes	Issuer name and desc	cription:	
				\$
				\$
				\$

Debtor 1	<u>Dina</u> First Name Middle N	Coleman-Deal  Last Name	Case number (if known)	
26 U.S.C	. §§ 530(b)(1), 529A(b	n), and 529(b)(1). Institution name and description. Separa	gram, or under a qualified state tuition tells file the records of any interests.11 U.	S.C. § 521(c):
exercisa	quitable or future int ble for your benefit	erests in property (other than anything	listed in line 1), and rights or powers	
	Give specific nation about them			\$
Examples  No Yes.		rks, trade secrets, and other intellectunes, websites, proceeds from royalties ar		\$
Examples No Yes.		ner general intangibles clusive licenses, cooperative association	holdings, liquor licenses, professional lice	\$
Money or pr	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes. 0	Give specific informati about them, including you already filed the re and the tax years	whether eturns	Federal: State: Local:	\$ \$ \$
■ No	s: Past due or lump su		t, maintenance, divorce settlement, prope	erty settlement
☐ Yes. (	Give specific informati	on	Alimony: Maintenar Support:	\$

30. **Other amounts someone owes you**Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

lacksquare Yes. Give specific information.....

Property settlement:

	ce; health savings account (HSA); credit, homeo	wner's, or renter's insurance	
☐ No ☐ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
or each policy and list he value	Term Life Insurance American Insurance	Son	\$ 0.00
			\$
			\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, exproperty because someone has died.	from someone who has died xpect proceeds from a life insurance policy, or ar	re currently entitled to receive	
Yes. Give specific information			
			\$
33. Claims against third parties, whether or Examples: Accidents, employment disputes  No	not you have filed a lawsuit or made a demar s, insurance claims, or rights to sue	nd for payment	
☐ Yes. Describe each claim			
l			\$
34. Other contingent and unliquidated claim to set off claims  No	s of every nature, including counterclaims of	the debtor and rights	
Yes. Describe each claim			\$
35. Any financial assets you did not already  No Yes. Give specific information	list		\$
	s from Part 4, including any entries for pages		\$_69.00
Part 5: Describe Any Business-F	Related Property You Own or Have	an Interest In. List any re	eal estate in Part 1.
37. Do you own or have any legal or equitab	le interest in any business-related property?		
No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the portion you own?  Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions yo	u already earned		
□ No			-
☐ Yes. Describe			\$
20 Office equipment furnishings and curr	diag		
<ul><li>39. Office equipment, furnishings, and supp Examples: Business-related computers, software</li><li>No</li></ul>	, modems, printers, copiers, fax machines, rugs, teleph	ones, desks, chairs, electronic devices	
☐ Yes. Describe			\$

		Ψ	
		\$	
		\$	
		\$	
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached		\$	
for Part 5. Write that number here	<del>7</del>		

Part 6:

□ No

☐ Yes. Give specific information .......

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

44. Any business-related property you did not already list

☐ No

☐ Yes.....

Official Form 106A/B

Schedule A/B: Property

Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2		<b>→</b>	\$_22,500.00
56. Part 2: Total vehicles, line 5	\$ <u>0.00</u>	-	
57. Part 3: Total personal and household items, line 15	\$ <u>2,600.00</u>		
58. Part 4: Total financial assets, line 36	\$ <u>69.00</u>	-	
59. Part 5: Total business-related property, line 45	\$		
60. Part 6: Total farm- and fishing-related property, line 52	\$		
61. Part 7: Total other property not listed, line 54	+\$		
62. <b>Total personal property.</b> Add lines 56 through 61	\$_2,669.00	Copy personal property total 🗲	+\$_2,669.00
63 Total of all property on Schedule A/B. Add line 55 + line 62			\$ 25,169,00

Fill in this in	formation to identify	your case:	
Debtor 1	Dina First Name	Middle Name	Coleman-Deal
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern District of Oh	io
Case number (If known)			

# ☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pá	art 1: Identi	fy the Property You Claim	as Exempt		
	You are clai	xemptions are you claiming? iming state and federal nonbank iming federal exemptions. 11 U	rruptcy exemptions. 11 S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
۷.	For any proper	ty you list on <i>Schedule A/B</i> tr	iat you claim as exemp	ot, fill in the information below.	
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	Single-family home 642 E 128	\$_22,500.00	\$ \$ 100% of fair market value, up to any applicable statutory limit	2329.66(A) (1) (b)
	Brief description: Line from Schedule A/B:	Furniture and Appliances	\$ 2,000.00	\$ 100% of fair market value, up to any applicable statutory limit	2329.66(A) (4) (a)
	Brief description: Line from Schedule A/B:	TV's Computers	<u>\$</u> 350.00	□ \$ ■ 100% of fair market value, up to any applicable statutory limit	2329.66(A) (4) (a)
3.	(Subject to adju		years after that for case	s filed on or after the date of adjustment.) 1,215 days before you filed this case?	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Dina Coleman-Deal

Case number (if known)\_\_\_\_\_

Part 2:

Additional Page

	on of the property and line \( \sigma \) that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Clothes	\$_200.00	\$ 100% of fair market value, up to	2329.66(A) (4) (a)
Line from Schedule A/B:			any applicable statutory limit	
Brief description: Line from	Jewelry	\$ <u>50.00</u>	\$ \$ 100% of fair market value, up to any applicable statutory limit	239.66(A) (4) (b)
Schedule A/B:			any applicable statutory limit	
Brief description: Line from	Ohio Educational Credit Uni	ion <sub>\$_65.00</sub>	□ \$ ■ 100% of fair market value, up to any applicable statutory limit	2329.66(A) (3)
Schedule A/B:				0200 00(A) (2)
Brief description:	Ohio Educational Credit Uni	ion <sub>\$_</sub> 3.00	<u></u> \$	2329.66(A) (3)
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:	Cash on Hand	\$_1.00	\$  100% of fair market value, up to	2329.66(A) (3)
Line from Schedule A/B:			any applicable statutory limit	
Brief description: Line from Schedule A/B:	Term Life Insurance Americ Insurance	an <sub>\$</sub> 0.00	\$ 100% of fair market value, up to any applicable statutory limit	2329.66(A) (6) (b), 3917.05
Brief description: Line from		\$	□ \$ □ 100% of fair market value, up to	
Schedule A/B:			any applicable statutory limit	
Brief description:		\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	<b>\$</b>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page <u>2</u> **of** 2

Fill in this in	formation to identify	your case:	
Debtor 1	Dina First Name	Middle Name	Coleman-Deal
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Ohio (State)
Case number (If known)			

☐ Check if this is an amended filing

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

for each claim. If more than one creditor	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column Course unsecure portion If any
1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	_			
	As of the date you file, the claim is: Check all that apply.	_		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
community debt  Date debt was incurred	Last 4 digits of account number	_		
community debt	, , <u>, , , , , , , , , , , , , , , , , </u>	- \$	_ \$	\$
community debt  Date debt was incurred	Last 4 digits of account number		_ \$	\$
community debt  Date debt was incurred  2  Creditor's Name	Last 4 digits of account number		\$	\$
community debt  Date debt was incurred 2	Last 4 digits of account number  Describe the property that secures the claim:	\$	\$	\$
community debt  Date debt was incurred  2  Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
community debt  Date debt was incurred  2  Creditor's Name	Last 4 digits of account number	\$	\$	\$
community debt  Date debt was incurred2  Creditor's Name  Number Street	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$	\$	\$
community debt  Date debt was incurred 2  Creditor's Name  Number Street  City State ZIP Code	Last 4 digits of account number	\$	\$	\$
community debt  Date debt was incurred2  Creditor's Name  Number Street	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$	\$	\$
community debt  Date debt was incurred	Last 4 digits of account number	\$	_ \$	\$
community debt  Date debt was incurred	Last 4 digits of account number	\$	<u>\$</u> \$	\$
community debt  Date debt was incurred	Last 4 digits of account number	\$	\$\$	\$
community debt  Date debt was incurred	Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	\$	\$\$	\$
community debt  Date debt was incurred	Last 4 digits of account number	\$	\$\$	\$

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of <u>1</u>

Fill in this information to identify your case:							
Debtor 1	Dina		Coleman-Deal				
-	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Ohio (State)				
Case number (If known)							

☐ Check if this is an amended filing

#### Official Form 106E/F

#### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: List All of Your PRIORITY Unsecure	ed Claims			
	Do any creditors have priority unsecured claims  No. Go to Part 2.  Yes.	s against you?			
	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the o unsecured claims, fill out the Continuation Page of	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's national part 1. If more than one creditor holds a particular claim	at claim here a ame. If you hav	nd show both e more than t	priority and wo priority
	(For an explanation of each type of claim, see the i	nstructions for this form in the instruction booklet.)			
			Total claim	Priority amount	Nonpriority amount
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply	/.		
	City State ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.	☐ Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of DDIODITY unacquired claims			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	Domestic support obligations			
	<u> </u>	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	☐ Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	□ No	Guiel. Specify	-		
	☐ Yes				
2.2		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street				
	Number Street	As of the date you file, the claim is: Check all that apply	/.		
		Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	·			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	$\hfill \Box$ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify	_		
	□ No □ Yes				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page 1 of 10

Pa	rt 2: List All of Your NONPRIORITY Unsecured Claim	s
3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes	
	nonpriority unsecured claim, list the creditor separately for each cla	al order of the creditor who holds each claim. If a creditor has more than one im. For each claim listed, identify what type of claim it is. Do not list claims already it, list the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
4.1	Canital One Bank Hee No	Last 4 digits of account number 8 0 8 7
	Capital One Bank Usa Na Nonpriority Creditor's Name	\$_4,615.00
	P O Box 30281	When was the debt incurred? $\underline{2016}$
	Number Street	_
	Salt Lake City, UT 30281 City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	State Zii Code	
	Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated
	Debtor 1 only	Disputed
	☐ Debtor 2 only	· ·
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	☐ At least one of the debtors and another	☐ Student loans
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts
	□ No	Other. Specify Credit Card
	Yes	
4.2	Cashmax Ohio	Last 4 digits of account number 6 2 1 3 \$900.00
	Nonpriority Creditor's Name	When was the debt incurred? 2017
	10800 Brookpark Rd A	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Cleveland, OH 44130 City State ZIP Code	
		☐ Contingent ☐ Unliquidated
	Who incurred the debt? Check one.	Disputed
	Debtor 1 only Debtor 2 only	·
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	☐ At least one of the debtors and another	Student loans
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts
	No	Other. Specify Payday Lender
	Yes	
4.3	Citibank N A	Last 4 digits of account number 6 2 1 3
	Nonpriority Creditor's Name	When was the debt incurred? 2017 \$1,131.00
	PO Box 6034	
	Number Street Souix Falls, SD 57117	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one.	Contingent
	Debtor 1 only	Unliquidated
	Debtor 2 only	☐ Disputed
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	☐ Student loans
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce
	Is the claim subject to offset?	that you did not report as priority claims
	No	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Store Credit
	☐ Yes	_ Galer. Speeding

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

page  $\frac{2}{2}$  of  $\frac{10}{2}$ 

Coleman-Deal

Case number (if known)\_\_\_\_

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.4	Fedloan Servicing Nonpriority Creditor's Name PO Box 60610 Number Street Harrisburg, PA 60610 City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	4.4, followed by 4.5, and so forth.  Last 4 digits of account number 2 F D 0  When was the debt incurred? 2012  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student Loans	* 50,000.00
4.5	Home Depot Nonpriority Creditor's Name  PO Box 182676 Number Street  Columbus, OH 43218-2676 City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Last 4 digits of account number 6 2 1 3  When was the debt incurred? 2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Store Credit	\$_1,131.00
4.6	Kia Motor Finance Nonpriority Creditor's Name  10550 Talbert Ave Number Street  Fountain Valley, CA 10550 City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Last 4 digits of account number 1 3 6 9  When was the debt incurred? 2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Car Lease Deficiency	\$ 7,353.00

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Middle Name

Coleman-Deal

Case number (if known)\_

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.7	Liberty Mutual Insurance	Last 4 digits of account number 6 2 1 3	\$_173.00
	Nonpriority Creditor's Name 175 Berkeley St Unit J091	When was the debt incurred?2017	
	Number Street Boston, MA 02116-5066	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Car Insurance	
	■ No □ Yes		
4.8		Last 4 digits of account number 3 3 7 3	\$ 300.00
	New York and Company Nonpriority Creditor's Name	When was the debt incurred? 2017	\$
	PO BOX 182789 Number Street		
	COLUMBUS, OH 43218-2789	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code  Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	·	
	Debtor 1 and Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:   Student loans	
	At least one of the debtors and another	lacktriangle Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Store Credit	
	Yes		
4.9		Last 4 digits of account number 3 4 7 4	\$ <u>3,712.00</u>
	Onemain Nonpriority Creditor's Name	When was the debt incurred? 2017	
	Po Box 1010 Number Street	As of the date you file, the claim is: Check all that apply.	
	Evansville, IN 47706 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	·	
	☐ Debtor 1 and Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:   Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  ☐ No ☐ Yes	Other. Specify <u>Personal Loan</u>	

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Middle Name

Coleman-Deal

Case number (if known)\_

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim	
Planet Fitness	Last 4 digits of account number 6 2 1 3	\$_100.00	
Nonpriority Creditor's Name 19332 Detroit	When was the debt incurred?		
Number Street Rocky River, OH 44116	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	Contingent		
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed		
Debtor 1 only	·		
☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:		
☐ At least one of the debtors and another	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that</li> </ul>		
☐ Check if this claim is for a community debt	you did not report as priority claims		
Is the claim subject to offset?	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify Fitness</li> </ul>		
■ No □ Yes			
.11 Speedweek	Last 4 digits of account number _1667_	\$ 226.00	
Speedycash Nonpriority Creditor's Name	When was the debt incurred? 2016	·	
P.O. Box #780408 Number Street	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> </ul>		
Wichita, KS 67278 City State ZIP Code	Contingent		
Who is a surred the debt Charles	Unliquidated		
Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Disputed		
Debtor 2 only	Type of NONPRIORITY unsecured claim:		
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>		
☐ Check if this claim is for a community debt	you did not report as priority claims		
Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Payday		
□ No □ Yes	Oner. Specify <u>r dyddy</u>		
12	Last 4 digits of account number 6 2 0 2	\$_560.00	
Swiss Colony Nonpriority Creditor's Name	-		
1515 S 21st St	When was the debt incurred? 2013		
Number Street Clinton, IA 52732	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	Contingent		
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed		
Debtor 1 only	·		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:		
☐ At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a community debt	you did not report as priority claims		
Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Store Credit		
□ No □ Yes	. ,		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Middle Name

Coleman-Deal

Case number (if known)\_

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.13	Syncb/old Navy Nonpriority Creditor's Name	Last 4 digits of account number 4 8 0 3	\$ 427.00
	Po Box 965005	When was the debt incurred? 2017	
	Number Street Orlando, FL 32896-5005	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	<ul><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	$\square$ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Store Credit	
	□ No □ Yes		
4.14	Circoh/somo	Last 4 digits of account number 0 7 5 6	\$ 940.00
	Syncb/sams Nonpriority Creditor's Name	When was the debt incurred? 2017	·
	Po Box 965005 Number Street	As of the date you file, the claim is: Check all that apply.	
	Orlando, FL 32896-5005         State         ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only	·	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:  Student loans	
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  □ No	Other. Specify Store Credit	
	☐ Yes		
4.15		Loot 4 digits of account gumbar 2 9 1 0	\$ <u>582.00</u>
	Syncb/tjx Co Plcc Nonpriority Creditor's Name	Last 4 digits of account number 3 8 1 0	
	Po Box 965015 Number Street	When was the debt incurred? 2017	
	Orlando, FL 32896	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	<ul><li>Debts to pension or profit-sharing plans, and other similar debts</li><li>Other. Specify <u>Store Credit</u></li></ul>	
	□ No □ Yes		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Middle Name

Coleman-Deal

Case number (if known)\_

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim			
4.16	Vivnt, Inc	Last 4 digits of account number 0 5 3 7	<sub>\$</sub> 237.55			
	Nonpriority Creditor's Name 62992 Collection Drive	When was the debt incurred? 2012				
	Number Street Chicago, IL 60693-0629	As of the date you file, the claim is: Check all that apply.				
	City State ZIP Code	Contingent Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>				
	Is the claim subject to offset?	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify Security</li> </ul>				
	■ No	- Calci. Specify -				
	Yes					
4.17			1.762.00			
	Webbank/fingerhut Nonpriority Creditor's Name	Last 4 digits of account number 5 3 6 7	\$_1,762.00			
	6250 Ridgewood Roa	When was the debt incurred?2016				
	Number Street Saint Cloud, MN 56303	As of the date you file, the claim is: Check all that apply.				
	City State ZIP Code	Contingent				
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed				
	Debtor 1 only Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:				
	Debtor 1 and Debtor 2 only	☐ Student loans				
	At least one of the debtors and another	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>				
	Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify Store Credit				
	Yes					
4.18			\$ 1,000.00			
	Woodforest National Bank Nonpriority Creditor's Name	Last 4 digits of account number 6 2 1 3	-			
	P.O. Box 7889	When was the debt incurred? 2014				
	Number Street	As of the date you file, the claim is: Check all that apply.				
	The Woodlands, TX 77387-7889 City State ZIP Code	Contingent				
	Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed				
	Debtor 1 only Debtor 2 only	Type of <b>NONPRIORITY</b> unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify Overdraft				
	☐ Yes					
			_			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Middle Name

Part 3:

#### List Others to Be Notified About a Debt That You Already Listed

Ad Astra Recovery Servic			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			on which entry in rate 1 or rait 2 did you list the original creator:
7330 W 33rd St N			Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street Ste 118			Part 2: Creditors with Nonpriority Unsecured Clair
			Last 4 digits of account number 1 6 6 7
Wichita, KS 67205 City	State	ZIP Code	
Alpha Recovery Corp.			On which entry in Part 1 or Part 2 did you list the original creditor?
6912 S. Quentin St			Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street #101			Part 2: Creditors with Nonpriority Unsecured Claims
Centennial, CO 80112			
City	State	ZIP Code	Last 4 digits of account number 2 1 5 3
CREDIT COLLECTION SERVIC			On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX 9134			Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			■ Part 2: Creditors with Nonpriority Unsecured Claims
NEEDHAM, MA 02494-9134	Ctat	710.0-1-	Last 4 digits of account number 4 6 8
City	State	ZIP Code	Out the state of t
Client Services Inc Name			On which entry in Part 1 or Part 2 did you list the original creditor?
3451 Harry S Truman Blvd			Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
St Charles, MO 63301-4047	State	ZIP Code	Last 4 digits of account number 2 6 5 5
Jefferson Capital Systems			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line 4.47 of (Check and). Dort 1. Creditors with Driving Ungergrand Claims
16 McLeland Number Street			Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
			Claims
St. Cloud, MN 56303			Last 4 digits of account number 2 1 5 3
City	State	ZIP Code	
Portfolio Recovery Associates  Name			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 12914			Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			■ Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk Va 22544			
Norfolk, Va 23541 City	State	ZIP Code	Last 4 digits of account number 3 9 5 4
Portfolio Recovery Associates			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 12914			Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Norfolk, Va 23541	State	ZIP Code	Last 4 digits of account number 3 1 7 2

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Part 3:

#### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Premiere Credit of NA				On which entry in Part 1 or Part 2 did you list the original creditor?		
				Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 19309 Number Street				Part 2: Creditors with Nonpriority Unsecured Claim		
				Last 4 digits of account number 8 8 0 6		
Indianap <sup>City</sup>	olis, IN 46219-0309	State	ZIP Code			
Name				On which entry in Part 1 or Part 2 did you list the original creditor?		
varie				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims		
				Last 4 digits of account number		
City		State	ZIP Code			
Name				On which entry in Part 1 or Part 2 did you list the original creditor?		
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
				Part 2: Creditors with Nonpriority Unsecured Claims		
City		State	ZIP Code	Last 4 digits of account number		
				On which entry in Part 1 or Part 2 did you list the original creditor?		
Name				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims		
City		State	ZIP Code	Last 4 digits of account number		
				On which entry in Part 1 or Part 2 did you list the original creditor?		
Name				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims		
				Last 4 digits of account number		
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims		
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims		
				Last 4 digits of account number		
City		State	ZIP Code	Last 7 digits of account number		
Name				On which entry in Part 1 or Part 2 did you list the original creditor?		
Number	Street			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
				Part 2: Creditors with Nonpriority Unsecured Claims		
City		State	ZIP Code	Last 4 digits of account number		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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#### Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. 159. Add the amounts for each type of unsecured claim.

Total clai	ms
from Part	1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. **Other.** Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- Total claim
- 6a. \$ 0.00
- 6b. \$ 0.00
- 6c. \$ 0.00
- 6d. +<sub>\$</sub> 0.00
- 6e. \$ 0.00

## Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- Total claim
- 6f. \$ 50,000.00
- 6g. \$\_0.00
- 6h. <sub>\$</sub> 0.00
- 6i. + <sub>\$\_25,149.55</sub>
- 6j. \$\_75,149.55

Fill in this information to identify your case:							
Debtor	Dina First Name	Middle Name	Colemar Last Name	n-Deal			
Debtor 2 (Spouse If filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	District of _	Ohio (State)				
Case number (If known)							

☐ Check if this is an amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	company wit	h whom you h	nave the contract or	lease	State what the contract or lease is for
2.1						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.2						
	Name					
	Number	Street				
2.2	City		State	ZIP Code		
2.3						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.4						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.5						
	Name					
	Number	Street				
	City		State	ZIP Code		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

page 1 of 1

Fill in this information to identify your case:							
Debtor 1	Dina First Name	Middle Name	Coleman-Deal  Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Northern			District ofOhio (State)				
Case number (If known)			_				

☐ Check if this is an amended filing

### Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do no	t list either spouse	as a codebtor.)						
	☐ Yes								
2.	Within the last 8 years, have you lived in a community proper Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerl								
	No. Go to line 3.								
	☐ Yes. Did your spouse, former spouse, or legal equivalent live	with you at the time	??						
	□ No								
			Fill in the name and current address of that person.						
	= = = = = = = = = = = = = = = = = = = =								
	Name of your spouse, former spouse, or legal equivalent		_						
			_						
	Number Street								
			_						
	City State	ZIP Code							
3.	In Column 1, list all of your codebtors. Do not include your sp	ouse as a codebt	or if your spouse is filing with you. List the person						
	shown in line 2 again as a codebtor only if that person is a gu	uarantor or cosign	ner. Make sure you have listed the creditor on						
	Schedule D (Official Form 106D), Schedule E/F (Official Form	106E/F), or Sched	lule G (Official Form 106G). Use Schedule D,						
	Schedule E/F, or Schedule G to fill out Column 2.								
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt						
	Column 1. Tour codestor								
			Check all schedules that apply:						
3.1			D. Octobby D. For						
	Name		Schedule D, line						
			Schedule E/F, line						
	Number Street		☐ Schedule G, line						
	City State	ZIP Code							
3.2									
	Name		Schedule D, line						
	· · · · · · · · · · · · · · · · · · ·		☐ Schedule E/F, line						
	Number Street		Schedule G, line						
	City State	ZIP Code							
3.3	J		Schedule D, line						
	Name		Schedule E/F, line						
	Number Street		Schedule G, line						
			Scriedule G, line						
	City State	ZIP Code							

Official Form 106H Schedule H: Your Codebtors page 1 of 1\_

F	ill in this in	formation to identify	your case:					
_	obtor 1	Dina		Coleman-Deal				
D	ebtor 1	First Name	Middle Name	Last Name		_		
_	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		_		
U	nited States E	Bankruptcy Court for the:	Northern	District of Ohio				
	ase number	. ,		(State	e)	Check if t	his is:	
	If known)						nended filing	
							plement showing postpetition chapter 13	3
_	· · · · -	4001				incom	e as of the following date:	
		rm 106I	-			MM / [	DD / YYYY	
S	ched	ule I: You	ır Income				12/15	
If y	ou are sep parate shee	arated and your spou	ıse is not filing with you, c top of any additional pag	do not include inf	orma	tion about your spo	you, include information about your spou ouse. If more space is needed, attach a known). Answer every question.	se.
1.	Fill in your	employment n.		Debtor 1			Debtor 2 or non-filing spouse	
	attach a se	more than one job, parate page with about additional	Employment status	☐ Employed ☐ Not employ	⁄ed		☐ Employed☐ Not employed	
	Include par self-employ	t-time, seasonal, or ved work.		Not Working				
	•	may include student ker, if it applies.	Occupation					_
			Employer's name					_
			Employer's address	Number Street			Number Street	_
				Number Street			Number Street	
								-
				City	Stat	e ZIP Code	City State ZIP Code	-
			How long employed ther	·			,	
			iong employee me		-		<del></del>	
Р	art 2:	Give Details About	Monthly Income					
	spouse unl If you or yo	ess you are separated ur non-filing spouse ha		er, combine the info	Ü		rite \$0 in the space. Include your non-filing for that person on the lines	
	реюм. п ус	и пееи тоге ѕрасе, а	llacii a separate sneet to th	15 101111.				
						For Debtor 1	For Debtor 2 or non-filing spouse	
2			ary, and commissions (be calculate what the monthly		2.	\$0.00	\$0.00	
3	. Estimate	and list monthly over	rtime pay.		3.	+\$0.00	+ \$0.00	

Official Form 1061 Schedule I: Your Income page 1

4. Calculate gross income. Add line 2 + line 3.

\$ 0.00

\$ 0.00

Debtor 1	Dina First Name	Coleman-Deal  Middle Name Last Name		Ca	ase number (if	known)_					_
				Fo	r Debtor 1			Debtor 2 or			
Сор	y line 4 here		<b>→</b> 4.	\$_	0.00		\$_	0.00			
5. <b>List</b>	all payroll dedu	ctions:									
5a.	Tax, Medicare,	and Social Security deductions	5a.	\$	0.00		\$	0.00			
		atributions for retirement plans	5b.	\$_	0.00	_	\$	0.00			
	•	ributions for retirement plans	5c.	\$	0.00	_	\$	0.00			
	-	yments of retirement fund loans	5d.	\$	0.00	_	\$	0.00			
	Insurance	,	5e.	\$	0.00	_	\$	0.00			
5f.	Domestic supp	port obligations	5f.	\$	0.00	_	\$	0.00			
	Union dues	<b>3</b>		\$	0.00	_	\$	0.00			
		ne Specific	5g. 5h.	. –			. –				
	Other deduction	ductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5q + 5h.		+\$_ \$	0.00	_	+ \$_ \$	0.00			
o. Au	a the payron ac	additions. Add lines out 1 ob 1 oc 1 out 1 oc 1 of 1 og 1 on.	. 0.	Ψ	0.00	_	Ψ_	0.00			
7. <b>Ca</b>	Iculate total mo	nthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	_	\$_	0.00			
8. List	t all other incom	e regularly received:									
8a.	Net income fro	m rental property and from operating a business, farm									
		ent for each property and business showing gross ry and necessary business expenses, and the total ome.	8a.	\$_	0.00	_	\$_	0.00			
8b.	. Interest and di		8b.	\$	0.00		\$_	0.00			
8c.	Family suppor	t payments that you, a non-filing spouse, or a depende ve	ent								
	Include alimony	, spousal support, child support, maintenance, divorce property settlement.	8c.	\$_	0.00	_	\$_	0.00			
	Unemploymen		8d.	\$	0.00	_	\$_	0.00			
8e	. Social Security	1	8e.	\$	0.00	_	\$_	0.00			
8f.	Include cash as that you receive	nent assistance that you regularly receive sistance and the value (if known) of any non-cash assistar s, such as food stamps (benefits under the Supplemental ance Program) or housing subsidies. Stamps.	nce 8f.	\$	193.00		\$	0.00			
				-		_	-				
•	. Pension or reti		8g.	\$	0.00	_	\$_	0.00			
8h	. Other monthly	income. Specify: Long Term Disability,	8h.	+\$_	1,081.57		+\$_	1,081.57	_		
9. <b>Ad</b>	d all other incor	ne. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	1,274.57	<u> </u>	\$_	0.00	╛		
	_	ncome. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,274.57	+	\$_	0.00	=	\$ <u>1,274.57</u>	
Incl	•	lar contributions to the expenses that you list in Schen from an unmarried partner, members of your household,			ents, your ro	oomm	ates, a	and other			
	not include any a ecify:	mounts already included in lines 2-10 or amounts that are	not av	vailable	e to pay exp	enses 	listed		. +	\$	
		the last column of line 10 to the amount in line 11. The a the Summary of Your Assets and Liabilities and Certain S					•	ome. 12		\$1,274.57 Combined	
_	you expect an i	ncrease or decrease within the year after you file this	form?	•						monthly inco	ome
	Yes. Explain:										

Official Form 106I Schedule I: Your Income page 2

Fill in this information to identify your case:				
Debtor 1 Dina Coleman	-Deal			
First Name Middle Name Last Name	Check if			
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name		nended fili	•	petition chapter 13
United States Bankruptcy Court for the: Northern District of			the following	
Case number(If known)	<u></u>	DD / YYYY	_	
Official Form 106J				
Schedule J: Your Expenses				12/15
Be as complete and accurate as possible. If two married people are fili information. If more space is needed, attach another sheet to this form (if known). Answer every question.		-		ng correct
Part 1: Describe Your Household				
1. Is this a joint case?				
■ No. Go to line 2. □ Yes. <b>Does Debtor 2 live in a separate household?</b>				
<ul><li>☐ No</li><li>☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for S</li></ul>	Separate Household of Debtor 2	2.		
2. Do you have dependents?	Danas danda salakia salakia da		D	December of the
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do not state the dependents' names.	· 			□ No □ Yes
nuncs.				☐ No
			<del></del>	Yes
				☐ No☐ Yes
				□ No
			<del></del>	Yes
				☐ No
				<b>□</b> Yes
<ul> <li>3. Do your expenses include expenses of people other than yourself and your dependents?</li> </ul> No Yes				
Part 2: Estimate Your Ongoing Monthly Expenses				
Estimate your expenses as of your bankruptcy filing date unless you a expenses as of a date after the bankruptcy is filed. If this is a supplem applicable date.			-	
Include expenses paid for with non-cash government assistance if you	ı know the value of			
such assistance and have included it on Schedule I: Your Income (Offi	•		Your exper	nses
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	first mortgage payments and	4.	\$ 0.00	<del></del>
If not included in line 4:				
4a. Real estate taxes		4a.	\$ 52.00	
4b. Property, homeowner's, or renter's insurance		4b.	\$ 0.00	<del></del>
4c. Home maintenance, repair, and upkeep expenses		4c.	\$ 0.00	<del></del>
4d. Homeowner's association or condominium dues		4d.	\$ 0.00	

Official Form 106J Schedule J: Your Expenses page 1

Dina

Coleman-Deal

Case number (if known)\_

Your expenses 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. 6. Utilities: 165.00 Electricity, heat, natural gas 6a. 6a. 50.00 Water, sewer, garbage collection 6h 6h 149.00 Telephone, cell phone, Internet, satellite, and cable services 6c. 0.00 Other. Specify: 6d. 6d. 455.00 7. Food and housekeeping supplies 7. 0.00 Childcare and children's education costs 8 Clothing, laundry, and dry cleaning 9. 90.00 Personal care products and services 95.00 10. 10. 0.00 Medical and dental expenses 11 Transportation. Include gas, maintenance, bus or train fare. 12. 80.00 Do not include car payments. 12. 65.00 Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations 25.00 14. 14. 15 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 0.00 15a. Life insurance 15a. 0.00 15b. Health insurance 15b. 0.00 15c. Vehicle insurance 15c. 0.00 15d. Other insurance. Specify:\_\_ 15d. \$ Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 \$ Specify: 16. 17. Installment or lease payments: 0.00 17a. Car payments for Vehicle 1 17a. 0.00 17b. Car payments for Vehicle 2 17b. 0.00 17c. Other. Specify:\_ \$ 0.00 17d. Other. Specify: 17d Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 0.00 Other payments you make to support others who do not live with you. 0.00 Specify: 0 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0.00 20a. Mortgages on other property 20a. 0.00 20b. Real estate taxes 20b. 0.00 20c. Property, homeowner's, or renter's insurance 20c. 0.00 20d. Maintenance, repair, and upkeep expenses 20d. 0.00 20e. Homeowner's association or condominium dues 20e.

Official Form 106J Schedule J: Your Expenses page 2

Dehtor	1	

Dina

Coleman-Deal

ımo

Case number (if known)\_

21. Other. Specify:

21. +\$ 0.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23b. - \$ 1,226.00

48.57

1,274.57

23a.

23c.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here:

an-Deal
Ohio (State)

☐ Check if this is an amended filing

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	ad the summary and schedules filed with this declaration and
that they are true and correct.	
✗ /s/Dina Coleman-Deal	×
Signature of Debtor 1	Signature of Debtor 2
organical of Boston 1	O.g. (ac.) 5. 255(d) 2
Date 01/18/2019	Date
MM / DD / YYYY	MM / DD / YYYY

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Fill in this in	formation to identify	your case:	
Debtor 1	Dina First Name	Middle Name	Coleman-Deal Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern District	of Ohio
Case number (If known)			

☐ Check if this is an amended filing

### Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	our current marital sta				
☐ Marrie ☐ Not ma	d	itus?			
■ No	e last 3 years, have you	·	·		
Debt	tor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Num	nber Street		From To	Same as Debtor 1  Number Street	Same as Debtor 1  From To
City		State ZIP Code		City State ZIP Code	☐ Same as Debtor 1
Num	nber Street		From To	Number Street	From To
City		State ZIP Code		City State ZIP Code	
states and	e last 8 years, did you d territories include Ariz	ona, California, Idah	o, Louisiana, Nevad	valent in a community property state or territory? (Cda, New Mexico, Puerto Rico, Texas, Washington, and m 106H).	community property Wisconsin.)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Dehtor	1	

 Dina
 Coleman-Deal

 First Name
 Middle Name
 Last Name

old you have any income from employmen ill in the total amount of income you received you are filing a joint case and you have inco	•	<del>-</del> ·		
■ No ■ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
For last calendar year: (January 1 to December 31, 2018 )	<ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>	\$_3,500.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
For the calendar year before that:	Wages, commissions, bonuses, tips	\$ 29,075.00	☐ Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2017 / YYYY	Operating a business	φ <u>23,070.00</u>	Operating a business	Ψ
pid you receive any other income during the notice income regardless of whether that income nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each	come is taxable. Examples nents; pensions; rental inc g a joint case and you have	s of other income are alinome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing	come is taxable. Examples nents; pensions; rental inc g a joint case and you have	s of other income are alinome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inc g a joint case and you have	s of other income are alinome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D	s of other income are alinome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once it you listed in line 4.	suits; royalties; and e under Debtor 1.  Gross income from each source
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each of the prosecution o	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income	s of other income are alinome; interest; dividends; e income that you receiv o not include income that  Gross income from each source (before deductions and	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income Describe below.	s of other income are alinome; interest; dividends; e income that you receiv o not include income that  Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each of the prosecution o	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income Describe below.	s of other income are alinome; interest; dividends; e income that you receiv o not include income that  Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each of the prosecution o	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income Describe below.	s of other income are alinome; interest; dividends; e income that you receiv o not include income that  Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)
reclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each source and the gross income from each of the proof of t	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income Describe below.  Long Term Disability	Gross income from each source (before deductions and exclusions)  \$1,088.00\$	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions and exclusions)  - \$
reclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each source and the gross income from each of the proof of t	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income Describe below.  Long Term Disability	Gross income from each source (before deductions)  \$\frac{1}{3}\text{1,088.00}\$ \$\frac{1}{3}\text{1,440.00}\$	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
reclude income regardless of whether that income nemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each of the proof	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. D  Debtor 1  Sources of income Describe below.  Long Term Disability	Gross income from each source (before deductions)  \$\frac{1}{3}\text{1,088.00}\$ \$\frac{5}{3}\text{440.00}\$ \$\frac{5}{3}\text{440.00}\$	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  - \$
reclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from each of the proof of	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor 1  Sources of income Describe below.  Long Term Disability  Long Term Disability	Gross income from each source (before deductions)  \$\frac{1}{5},440.00\$	money collected from laws ed together, list it only once it you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)  - \$\$\$\$\$\$\$\$\$\$\$\$\$\$

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Dina Coleman-Deal Case number (if known)\_\_\_\_

			OddC HdHbCl (II khown)
First Name	Middle Name	Last Name	

Part 3 List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street Loan repayment ■ Suppliers or vendors Other City State ZIP Code ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street ☐ Loan repayment ■ Suppliers or vendors Other State ZIP Code \_\_\_\_\_ \$\_\_ ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street Loan repayment ■ Suppliers or vendors Other \_ City ZIP Code State

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

or 1	Dina		Coleman-De	al	_	Case number (if known)	
	First Name	Middle Name	Last Name				
<i>Inside</i> corpoi agent,	ers include you rations of which, including one	r relatives; any gene h you are an officer,	eral partners; re director, perso	elatives of any on in control, o	general partners; p r owner of 20% or i	partnerships of whic more of their voting	who was an insider? h you are a general partner; securities; and any managing r domestic support obligations,
■ No							
☐ Ye	es. List all payı	ments to an insider.					
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
					\$	\$	
Ī	Insider's Name				Φ	_ Ψ	
-	Number Street						
	. tambor						
-							
ō	City	State	ZIP Code				
					\$	\$	
Ī	Insider's Name				Ψ	Ψ	
Ī	Number Street						
ō	City	State	ZIP Code				
Within	n 1 year befor	e you filed for banl	kruptcy, did yo	ou make any p	payments or trans	fer any property o	n account of a debt that benefited
	sider? le navments or	n debts guaranteed	or cosianed by	an insider			
_		r debis guaranteed	or cosigned by	an maider.			
■ No □ Ye		ments that benefited	l an insider.				
				Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	owe	Include creditor's name
Ī	Insider's Name				\$	\$	
II.	moluer 5 Naille						
Ī	Number Street						
_							
_							
_	City	State	ZIP Code				
					\$	\$	
Ī	Insider's Name				*		
-	Number Street						
r	Number Street						
-							
ō	City	State	ZIP Code				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

 Dina
 Coleman-Deal

 First Name
 Middle Name
 Last Name

Case number (if known)\_\_\_\_\_

				wsuit, court action, or adm vorces, collection suits, pate		
No						
	Fill in the details.					
		Natı	ire of the case	Court or agency		Status of the case
				count or agonoy		Gladao o. mo caco
0	4:41-					—— Pending
Cas	se title			Court Name		On appeal
						_
				Number Street		Concluded
Cas	se number					
				City Sta	ate ZIP Code	
						_
Cas	se title			Court Name		Pending
						On appeal
				Number Street		Concluded
Cas	se number					
Cas	se number			City Sta	ate ZIP Code	
No.	Go to line 11. Fill in the information	he details below.				
No.	Go to line 11.		Describe the propert	y	Date	Value of the property
No.	Go to line 11.		Describe the propert	у	Date	Value of the property
No.	Go to line 11. Fill in the information		Describe the propert	у	Date	Value of the property
No.	Go to line 11.		Describe the propert	у	Date	
No.	Go to line 11. Fill in the information		Describe the propert		Date	
No.	Go to line 11.  Fill in the information of the control of the cont		Explain what happer	ned	Date	
No.	Go to line 11.  Fill in the information of the control of the cont		Explain what happer  Property was r	ned epossessed.	Date	
No.	Go to line 11.  Fill in the information of the control of the cont		Explain what happer  Property was r  Property was f	epossessed. preclosed.	Date	
No.	Go to line 11.  Fill in the information of the control of the cont		Explain what happer  Property was for Pr	epossessed. preclosed.	Date	
No.	Go to line 11.  Fill in the information  Creditor's Name  Number Street	below.	Explain what happer  Property was for Pr	epossessed. preclosed. parnished. attached, seized, or levied.	Date	\$
No.	Go to line 11.  Fill in the information  Creditor's Name  Number Street	below.	Explain what happer  Property was for Property was for Property was good Property was a property	epossessed. preclosed. parnished. attached, seized, or levied.		\$
No.	Go to line 11.  Fill in the information  Creditor's Name  Number Street	below.	Explain what happer  Property was for Property was for Property was good Property was a property	epossessed. preclosed. parnished. attached, seized, or levied.		\$
No.	Go to line 11.  Fill in the information  Creditor's Name  Number Street	below.	Explain what happer  Property was for Property was for Property was good Property was a property	epossessed. preclosed. parnished. attached, seized, or levied.		\$Value of the propert
No.	Go to line 11.  Fill in the information of the control of the cont	below.	Explain what happer  Property was for Property was for Property was good Property was a property	epossessed. preclosed. parnished. httached, seized, or levied.		\$Value of the propert
No.	Go to line 11.  Fill in the information of the control of the cont	below.	Explain what happer Property was for Property was for Property was a Property was a Describe the propert	epossessed. preclosed. parnished. uttached, seized, or levied. y		\$Value of the propert
No.	Go to line 11.  Fill in the information of the control of the cont	below.	Explain what happer Property was r Property was g Property was a Property was a Describe the propert  Explain what happer	epossessed.  preclosed. parnished. uttached, seized, or levied.  y  ned  epossessed.		\$Value of the propert
No.	Go to line 11.  Fill in the information of the control of the cont	below.	Explain what happer Property was for Property was for Property was a Property was a Describe the propert	epossessed. preclosed. parnished. patrached, seized, or levied.  y  ed  epossessed. preclosed.		\$Value of the propert

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Dina		Coleman-Deal	Case number (if known)
	First Name	Middle Name	Last Name	

No			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name		was taken	
Number Street	_		\$
	_		
City State ZIP Code	Last 4 digits of account number: XXXX		
	Last 4 digits of account number. XXXX		
nin 1 year before you filed for bankrup ditors, a court-appointed receiver, a cu	otcy, was any of your property in the possession of ustodian, or another official?	f an assignee for the benefi	it of
No			
Yes			
List Certain Gifts and Contrib	outions		
sin 2 years hafers you filed for head	many did you give one sifts with a tatal value of	oro than \$600 mar	
iin 2 years before you filed for bankru No	ptcy, did you give any gifts with a total value of mo	ore than \$600 per person?	
Yes. Fill in the details for each gift.			
Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$
Gifts with a total value of more than \$600	Describe the gifts		Value \$
Gifts with a total value of more than \$600 per person	Describe the gifts		<b>Value</b> \$\$
Gifts with a total value of more than \$600 per person	Describe the gifts		\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts		\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Describe the gifts		\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts		\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Describe the gifts  Describe the gifts		\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		Dates you gave	\$\$ \$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		Dates you gave	\$ \$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		Dates you gave	\$\$ \$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		Dates you gave	\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		Dates you gave	\$

Statement of Financial Affairs for Individuals Filing for Bankruptcy

1	Dina First Name	Middle Name	Coleman-Deal  Last Name		Case number	(if known)		
ithin	2 years befo	re you filed for	bankruptcy, did you	ı give any gifts or co	ontributions with a to	otal value	of more than \$6	600 to any charity?
No								
Yes	s. Fill in the d	etails for each g	ift or contribution.					
	ifts or contribu at total more t	utions to charities han \$600	Describe v	vhat you contributed			Date you contributed	Value
								\$
Cha	arity's Name							Φ.
								Φ
Num	nber Street							
•								
	List Cert		bankruptcy or since	you filed for bankru	ıptcy, did you lose ar	nything be	ecause of theft,	fire, other
6: lithin saste	List Cert	ain Losses re you filed for ing?	bankruptcy or since	you filed for bankru	ıptcy, did you lose ar	nything be	ecause of theft,	fire, other
6: lithin saste	List Cert	ain Losses re you filed for ing?	bankruptcy or since	you filed for bankru	ıptcy, did you lose ar	nything be	ecause of theft,	fire, other
6: Saste No Yes	List Cert.  1 year beforer, or gambli	ain Losses re you filed for ing? etails.	d Describe	any insurance coverag	e for the loss has paid. List pending in:		ecause of theft, Date of your loss	fire, other  Value of property lost
6: Saste No Yes	List Cert.  1 year beforer, or gambli  5. Fill in the describe the pro-	ain Losses re you filed for ing? etails.	d Describe	any insurance coverag	e for the loss has paid. List pending in:		Date of your	Value of property
6: Saste No Yes	List Cert.  1 year beforer, or gambli  5. Fill in the describe the pro-	ain Losses re you filed for ing? etails.	d Describe	any insurance coverag	e for the loss has paid. List pending in:		Date of your	Value of property lost
6: Vithin Saste No Pen De	List Cert.  1 year beforer, or gambli  5. Fill in the describe the property of the loss occurs.	ain Losses re you filed for ing? etails. operty you lost ar curred	Describe Include the claims on	any insurance coverag	e for the loss has paid. List pending in:		Date of your	Value of property lost
6:  Within saste  No  De ho	List Certa  1 year beforer, or gambli  2. Fill in the describe the propose the loss occurred.	ain Losses re you filed for ing? etails. operty you lost ar curred	Describe Include the claims on	any insurance coverage amount that insurance line 33 of Schedule A/B:	e for the loss has paid. List pending in: <i>Property</i> .	isurance	Date of your loss	Value of property lost
6:  Vithin saste  No  Per  Per  Vithin bu co	List Certa  1 year beforer, or gambli  2. Fill in the describe the proposer the loss occurred to the loss occurred	ain Losses re you filed for ing? etails. operty you lost arcurred in Payments re you filed for ut seeking ban	Describe Include the claims on  or Transfers bankruptcy, did you kruptcy or preparing	any insurance coverage amount that insurance line 33 of Schedule A/B:  or anyone else acting a bankruptcy petiti	ne for the loss has paid. List pending insert per loss Property.  Ing on your behalf pains	isurance	Date of your loss	Value of property lost
6:  Vithin saste  No  Per  Per  Vithin bu co	List Certa  1 year beforer, or gambli  2. Fill in the describe the proposer the loss occurred to the loss occurred	ain Losses re you filed for ing? etails. operty you lost arcurred in Payments re you filed for ut seeking ban	Describe Include the claims on  or Transfers bankruptcy, did you kruptcy or preparing	any insurance coverage amount that insurance line 33 of Schedule A/B:  or anyone else acting a bankruptcy petiti	e for the loss has paid. List pending ins Property.	isurance	Date of your loss	Value of property lost
6:  Vithin sastu Sastu No De ho  T:  Vithin ou coclude No No	List Certa  1 year beforer, or gambli  2. Fill in the describe the propose the loss occurred to the loss occurred	ain Losses re you filed for ing? etails. perty you lost arcurred in Payments re you filed for ut seeking bands, bankruptcy p	Describe Include the claims on  or Transfers bankruptcy, did you kruptcy or preparing	any insurance coverage amount that insurance line 33 of Schedule A/B:  or anyone else acting a bankruptcy petiti	ne for the loss has paid. List pending insert per loss Property.  Ing on your behalf pains	isurance	Date of your loss	Value of property lost
6:  Vithin sastu Sastu No De ho  T:  Vithin ou coclude No No	List Certa  1 year beforer, or gambli  2. Fill in the describe the proposed the loss occurrence of the loss occurrence occurrence of the loss occurrence	ain Losses re you filed for ing? etails. perty you lost arcurred in Payments re you filed for ut seeking bands, bankruptcy p	or Transfers  bankruptcy, did you kruptcy or preparing etition preparers, or c	any insurance coverage amount that insurance line 33 of Schedule A/B:  or anyone else acting a bankruptcy petitired it counseling agen	ne for the loss has paid. List pending inserted performently.  Ing on your behalf paid on? Incides for services requires	surance  y or trans	Date of your loss  fer any property	Value of property lost  \$  y to anyone
6: No No Per No	List Certa  1 year beforer, or gambli  2. Fill in the describe the properties of the loss occurred to the loss occ	ain Losses re you filed for ing? etails. perty you lost arcurred in Payments re you filed for ut seeking ban is, bankruptcy petails.	or Transfers  bankruptcy, did you kruptcy or preparing etition preparers, or c	any insurance coverage amount that insurance line 33 of Schedule A/B:  or anyone else acting a bankruptcy petiti	ne for the loss has paid. List pending inserted performently.  Ing on your behalf paid on? Incides for services requires	ny or trans	Date of your loss	Value of property lost  \$  y to anyone
6: No Do ho ho l Yes	List Certa  1 year beforer, or gambli  2. Fill in the describe the properties of the loss occurs occurs of the loss occurs of the loss occurs occurs occurs occurs occurs occurs on the loss occurs	ain Losses re you filed for ing? etails. perty you lost arcurred in Payments re you filed for ut seeking bands, bankruptcy petails. of Allen C. Hufforaid	or Transfers  bankruptcy, did you kruptcy or preparing etition preparers, or c	any insurance coverage amount that insurance line 33 of Schedule A/B:  or anyone else acting a bankruptcy petitired it counseling agen	ne for the loss has paid. List pending inserted performently.  Ing on your behalf paid on? Incides for services requires	surance  y or trans	Date of your loss  fer any property ir bankruptcy.  Date payment or transfer was	Value of property lost

Euclid

achlawfirm@gmail.com Email or website address

Person Who Made the Payment, if Not You

ОН

State

44123 ZIP Code

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	First Name Middle Name	Last N	ame			
			Description and value of any property tr	ransferred	Date payment or transfer was made	Amount of payment
i	Person Who Was Paid					\$
Ī	Number Street					\$
-	City State	ZIP Code				
Ī	Email or website address					
i	Person Who Made the Payment, it	Not You				
N	ot include any payment or lo	transfer that yo	Description and value of any property tr	ransferred	Date payment or	Amount of payme
■ N	lo	transfer that yo		ransferred	Date payment or transfer was made	Amount of payme
■ N	lo	transfer that yo		ransferred	transfer was	Amount of payme
■ N	es. Fill in the details.  Person Who Was Paid	transfer that yo		ransferred	transfer was	Amount of paymes \$ \$
■ N	es. Fill in the details.  Person Who Was Paid  Number Street  City State	ZIP Code	Description and value of any property to		transfer was made	\$
Withit transcluce	Person Who Was Paid  Number Street  City State  ferred in the ordinary code both outright transfers at include gifts and transfers	ZIP Code  d for bankrupt urse of your b		transfer any property	transfer was made	\$s an property
Withit transcluce	Person Who Was Paid  Number Street  City State  for 2 years before you file ferred in the ordinary co de both outright transfers of include gifts and transfer	ZIP Code  d for bankrupt urse of your b	Description and value of any property to toy, did you sell, trade, or otherwise to business or financial affairs?	transfer any property	transfer was made  to anyone, other the mortgage on your provious province or payments received	\$san property
Withit trans	Person Who Was Paid  Number Street  City State  for 2 years before you file ferred in the ordinary co de both outright transfers of include gifts and transfer	ZIP Code  d for bankrupt urse of your b	Description and value of any property to toy, did you sell, trade, or otherwise to business or financial affairs? ande as security (such as the granting of e already listed on this statement.	transfer any property f a security interest or r	transfer was made  to anyone, other the mortgage on your provious province or payments received	\$an property operty).
Within trans noclucion no N	Person Who Was Paid  Number Street  City State  Sterred in the ordinary or de both outright transfers of the include gifts and transfer oes. Fill in the details.	ZIP Code  d for bankrupt urse of your b	Description and value of any property to toy, did you sell, trade, or otherwise to business or financial affairs? ande as security (such as the granting of e already listed on this statement.	transfer any property f a security interest or r	transfer was made  to anyone, other the mortgage on your provious province or payments received	\$an property operty).

City

Person Who Received Transfer

Person's relationship to you \_\_\_\_

State ZIP Code

Number Street

Statement of Financial Affairs for Individuals Filing for Bankruptcy

ebtor 1	Dina First Name Middle Name	Coleman-Deal Last Name		Case number	(if known)	
are a b	peneficiary? (These are of	I for bankruptcy, did you transfe ften called asset-protection device		to a self-settled	trust or similar device of	which you
_		Description and value	ue of the property	transferred		Date transfer was made
Nar	me of trust					
). Within closed Include	n 1 year before you filed f d, sold, moved, or transfe le checking, savings, mo	I Accounts, Instruments, Sa or bankruptcy, were any financia erred? ney market, or other financial ac nds, cooperatives, associations,	al accounts or i	nstruments held	l in your name, or for you shares in banks, credit ι	
☐ No						
		Last 4 digits of acco		Type of account or nstrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	ame of Financial Institution	xxxx		Checking Savings		\$
Ci	ity State	ZIP Code	[	■ Money market ■ Brokerage ■ Other	_	
	ame of Financial Institution	XXXX	[	Checking Savings Money market		\$
Ci	ity State	ZIP Code		Brokerage Other	_	
securi	ties, cash, or other valua	ave within 1 year before you file bles?	d for bankruptc	y, any safe depo	sit box or other deposito	ory for
	<del></del> -	Who else had acces	ss to it?	Describ	e the contents	Do you still have it?
Na	ame of Financial Institution	Name				☐ No ☐ Yes
Nu	umber Street	Number Street  City State	ZIP Code			

City

ZIP Code

Statement of Financial Affairs for Individuals Filing for Bankruptcy

1 Dina	Coleman-Deal	Case number (if known)	
First Name Middle Name	Last Name	,	
	orage unit or place other than your home within	n 1 year before you filed for bankruptcy	<b>y</b> ?
No Yes. Fill in the details.			
Tes. Fill ill the details.	Who else has or had access to it?	Describe the contents	Do you sti
	Wild else has of had access to it:	Describe the contents	have it?
			□ No
Name of Storage Facility	Name		Yes
			<b>—</b> 163
Number Street	Number Street		
	City State ZIP Code		
City State	ZIP Code		
No		perty you borrowed from, are storing f	or,
<u> </u>			
<u> </u>	Where is the property?	Describe the property	Value
Yes. Fill in the details.	Where is the property?		Value
<u> </u>			
Yes. Fill in the details.	Where is the property?  Number Street		Value
Number Street	Number Street  City State ZIP C	Describe the property	Value
Yes. Fill in the details.  Owner's Name  Number Street	Number Street	Describe the property	Value
Yes. Fill in the details.  Owner's Name  Number Street  City State	Number Street  City State ZIP C	Describe the property	Value
Yes. Fill in the details.  Owner's Name  Number Street  City State  t 10: Give Details About	Number Street  City State ZIP Co	Describe the property	Value
Yes. Fill in the details.  Owner's Name  Number Street  City State  t 10: Give Details About  the purpose of Part 10, the folio	Number Street  City State ZIP Code  Environmental Information  Dowing definitions apply:	Describe the property	Value \$
Yes. Fill in the details.  Owner's Name  Number Street  City State  t 10: Give Details About  the purpose of Part 10, the folio	Number Street  City State ZIP Co	Describe the property  ode  cerning pollution, contamination, relea	\$sees of

substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☐ Yes. Fill in the details.

			Govern	mental ur	nit		Environmental law, if you know it	Date of notice
Name of site			Governme	ental unit				
Number Street			Number	Street				
			City		State	ZIP Code		
City	State	ZIP Code						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Dina		Coleman-Deal
First Name	Middle Name	Last Name

Case number	( : £ 1 · · · - · )		
Case Hullibel	(II KNOWN)		

Yes. Fill in the details.				
	Governmental unit	Environmen	tal law, if you know it	Date of notice
Name of all				
Name of site	Governmental unit			
Number Street	Number Street			
	City State ZIP Co	de		
City State ZIP Code	_			
ve you been a party in any judicial or a No Yes. Fill in the details.	administrative proceeding und	er any environme	ntal law? Include settlemen	
	Court or agency	Nature	of the case	Status of th case
Case title				☐ Pending
	Court Name			On appe
	Number Street			☐ Conclud
thin 4 years before you filed for bankr	Business or Connections to ruptcy, did you own a business	or have any of th	_	any business?
11: Give Details About Your B	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth mpany (LLC) or limited liability	Any Business or have any of the activity, either	full-time or part-time	any business?
Give Details About Your B thin 4 years before you filed for bankr A sole proprietor or self-employe A member of a limited liability co A partner in a partnership	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation	Any Business or have any of the er activity, either partnership (LLP	full-time or part-time	any business?
In: Give Details About Your Bethin 4 years before you filed for bankra A sole proprietor or self-employed A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a co	Any Business or have any of the er activity, either partnership (LLP	full-time or part-time	any business?
Give Details About Your Bethin 4 years before you filed for bankr  A sole proprietor or self-employe  A member of a limited liability co  A partner in a partnership  An officer, director, or managing  An owner of at least 5% of the vo	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a copporation of Part 12.	Any Business or have any of the er activity, either partnership (LLP proporation	full-time or part-time )	
Give Details About Your Bethin 4 years before you filed for bankr  A sole proprietor or self-employer  A member of a limited liability co  A partner in a partnership  An officer, director, or managing  An owner of at least 5% of the vortex.  No. None of the above applies. Go to Yes. Check all that apply above and	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a coporation of Part 12.	Any Business or have any of the er activity, either partnership (LLP proporation	full-time or part-time )  Employer Identification	
11: Give Details About Your Bhin 4 years before you filed for bankr A sole proprietor or self-employed A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the vol. No. None of the above applies. Go to Yes. Check all that apply above and Business Name	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a copporation of Part 12.	Any Business or have any of the er activity, either partnership (LLP proporation	full-time or part-time )  Employer Identification	n number Security number or ITIN
Give Details About Your Bethin 4 years before you filed for bankr A sole proprietor or self-employed A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the vol. No. None of the above applies. Go to Yes. Check all that apply above and	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a copporation of Part 12.	Any Business or have any of the er activity, either partnership (LLP) orporation or business.	full-time or part-time )  Employer Identification Do not include Social \$	n number Security number or ITIN
11: Give Details About Your Bhin 4 years before you filed for bankr A sole proprietor or self-employed A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the vol. No. None of the above applies. Go to Yes. Check all that apply above and Business Name	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth ampany (LLC) or limited liability executive of a corporation or equity securities of a corporation of Part 12.  fill in the details below for each describe the nature of the business.	Any Business or have any of the er activity, either partnership (LLP) orporation or business.	Employer Identification Do not include Social S	n number Security number or ITIN.
Give Details About Your Bethin 4 years before you filed for bankra A sole proprietor or self-employed A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and Business Name	Business or Connections to ruptcy, did you own a business ed in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a corporation of Part 12.  fill in the details below for each Describe the nature of the business of the process o	Any Business or have any of the ractivity, either partnership (LLP) orporation h business. usiness	Employer Identification Do not include Social S  EIN:  Dates business existed  From To	n number Security number or ITIN. — — — — — — d
Give Details About Your Bethin 4 years before you filed for bankr  A sole proprietor or self-employer  A member of a limited liability co  A partner in a partnership  An officer, director, or managing  An owner of at least 5% of the vorus. No. None of the above applies. Go to Yes. Check all that apply above and the Business Name	Business or Connections to ruptcy, did you own a business of in a trade, profession, or oth ampany (LLC) or limited liability executive of a corporation or equity securities of a corporation of Part 12.  fill in the details below for each describe the nature of the business.	Any Business or have any of the ractivity, either partnership (LLP) orporation h business. usiness	Employer Identification Do not include Social S  EIN:  Dates business existed  From To  Employer Identification	n number Security number or ITIN. — — — — — — d
hin 4 years before you filed for bankr A sole proprietor or self-employe A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo No. None of the above applies. Go to Yes. Check all that apply above and the sum of the self-employed by the self-employe	Business or Connections to ruptcy, did you own a business ed in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a corporation of Part 12.  fill in the details below for each Describe the nature of the business of the process o	Any Business or have any of the ractivity, either partnership (LLP) orporation h business. usiness	Employer Identification Do not include Social S  EIN:  Dates business existed  From To  Employer Identification Do not include Social S	n number Security number or ITIN. — — — — — — — d d o n number
thin 4 years before you filed for bankr A sole proprietor or self-employe A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the vo No. None of the above applies. Go to Yes. Check all that apply above and the sum of the street  Business Name  Number Street  City State ZIP Code	Business or Connections to ruptcy, did you own a business ed in a trade, profession, or oth impany (LLC) or limited liability executive of a corporation or equity securities of a corporation of Part 12.  fill in the details below for each Describe the nature of the business of the process o	Any Business or have any of the er activity, either or partnership (LLP) orporation or business. usiness	Employer Identification Do not include Social S  EIN:  Dates business existed  From To  Employer Identification Do not include Social S	n number Security number or ITIN.  d  n number Security number or ITIN.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Dina		Coleman-Deal	Case number (if known)
	First Name	Middle Name	Last Name	

	Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
Business Name		Do not include Social Security number of Trin.
		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To
·		
institutions, creditors, or other parties.	tcy, did you give a financial statement to anyone a	bout your business? Include all financial
Yes. Fill in the details below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code		
Part 12: Sign Below		
answers are true and correct. I understand	t of <i>Financial Affairs</i> and any attachments, and I d d that making a false statement, concealing prope result in fines up to \$250,000, or imprisonment fo	rty, or obtaining money or property by fraud
/s/ Dina Coleman-Deal	*	
Signature of Debtor 1	Signature of Debtor 2	
Date 1/18/2019	Date	
Did you attach additional pages to Your S	tatement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No □ Yes		
Did you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy	forms?
No	,	
Yes. Name of person		ch the Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

# United States Bankruptcy Court

		Nortnern	District Of	Onio	
[n :	re Dina Coleman-Deal				
				Case No	
Del	btor			Chapter 7	
	DISCLOS	SURE OF COM	PENSATION OF AT	TTORNEY FOR DEBTOR	
1.	named debtor(s) and that	compensation pa be paid to me, fo	aid to me within one y or services rendered or	ertify that I am the attorney for the above ear before the filing of the petition in to be rendered on behalf of the debtor(s) in s follows:	
	For legal services, I have	agreed to accept	t	\$_500.00	
	Prior to the filing of this	statement I have	received	\$ <u>250.00</u>	
	Balance Due			\$_250.00	
2.	The source of the compe	nsation paid to m	ne was:		
	<b>■</b> Debtor	Other	(specify)		
3.	The source of compensat	ion to be paid to	me is:		
	<b>■</b> Debtor	Other	(specify)		
4.	I have not agree members and associ			sation with any other person unless they are	
		es of my law firn	n. A copy of the agree	on with a other person or persons who are no ment, together with a list of the names of the	
5.	In return for the above-d case, including:	isclosed fee, I ha	ve agreed to render leg	gal service for all aspects of the bankruptcy	
	a. Analysis of the debt file a petition in ban		ation, and rendering a	ndvice to the debtor in determining whether	to
	b. Preparation and filin	g of any petition	, schedules, statements	s of affairs and plan which may be required;	
	c. Representation of th hearings thereof;	e debtor at the m	eeting of creditors and	l confirmation hearing, and any adjourned	

д	Representation of the	debtor in adversary	proceedings and other	r contested bankruptcy matters;
u.	representation of the	ucotoi ili auveisai y	proceedings and onle	i contested bankrupte y matters,

	[0.1			1 1
Α .	l()ther	provisions	as	needed
٠.	Ouici	DI O VISIOIIS	us	necucu

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 01/18/2019
 /s/ Allen C Hufford (OSC #0075398)

 Date
 Signature of Attorney

Law Offices of Allen C Hufford

Name of law firm

Fill in this information to identify your case:					
Debtor 1	Dina		Coleman-Deal		
_	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Northern			District of Ohio		
Case number (If known)			(State)		

# ☐ Check if this is an amended filing

### Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7 12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Creditor's ☐ Surrender the property. □ No name: ☐ Retain the property and redeem it. ☐ Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: ☐ Retain the property and [explain]: \_ Creditor's □ No ☐ Surrender the property. name: lacktriangle Retain the property and redeem it. ☐ Yes Description of lacksquare Retain the property and enter into a property Reaffirmation Agreement. securing debt: ☐ Retain the property and [explain]: \_ Creditor's ☐ No ☐ Surrender the property. name: Retain the property and redeem it. ☐ Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: ☐ Retain the property and [explain]: \_ Creditor's ☐ Surrender the property. ☐ No name: ☐ Yes ☐ Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: ☐ Retain the property and [explain]:

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

ina		Coleman-Deal	
et Name	Middle Name	Last Namo	

Case number (If known)\_\_\_\_\_

Part 2:	List Your Unexpired Personal Property	Leases

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
escription of leased operty:	Yes
essor's name:	☐ No
escription of leased operty:	Yes
essor's name:	□ No
escription of leased operty:	☐ Yes
essor's name:	□ No □ Yes
escription of leased operty:	□ Yes
essor's name:	□ No
escription of leased operty:	☐ Yes
essor's name:	□ No
escription of leased operty:	☐ Yes
ssor's name:	□ No
escription of leased operty:	☐ Yes
3: Sign Below	
der penalty of perjury, I declare that I have indicated my inten sonal property that is subject to an unexpired lease.	tion about any property of my estate that secures a debt and any
/s/ Dina Coleman-Deal	
	e of Debtor 2

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Notice Required by 11 U.S.C. [] 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
------------	-------------

	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. U.S.C. 🏿 342(b) for Individuals Filing for Bankruptcy (Form 2010)

# UNITED STATES BANKRUPTCY COURT Northern District of Ohio

In re Dina Coleman-Deal ,	Case No.
Debtor(s)	Chapter 7
VERIFICATION O	OF CREDITOR MATRIX
The above-named debtor hereby verifies that the attached list o	f creditors is true and correct to the best of his/her knowled
$_{ m X}$ /s/ Dina Coleman-Deal	01/18/2019
Signature of Debtor	Date
X	
Signature of Joint Debtor If Any	Date

Fill in this information to identify your case:					
Debtor 1	Dina First Name	Middle Name	Coleman-Deal		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern District of	Ohio		
Case number (If known)			_		

Check one box only as directed in this form and	l in
Form 122A-1Supp:	

- 1. There is no presumption of abuse.
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
- 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

### B 122A-1

## **Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under* 1707(b)(2) (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

1	What is your	marital and	filing etatue?	Check one only.

- Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☐ Married and your spouse is NOT filing with you. You and your spouse are:
  - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
  - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Column A

Debtor 1

Column B

Debtor 2 or non-filing spouse

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	2.	Your gross wages, salary, tips, bonuses, overtime, ar (before all payroll deductions).	nd commiss	sions		\$_0.00	\$_	0.00
I	3.	<b>Alimony and maintenance payments.</b> Do not include particular of column B is filled in.	ayments fror	m a spouse if		\$_0.00	\$_	0.00
	4.	All amounts from any source which are regularly paid of you or your dependents, including child support. It from an unmarried partner, members of your household, and roommates. Include regular contributions from a spot filled in. Do not include payments you listed on line 3.	nclude regul your depend	ar contributio lents, parents	ns S,	\$_0.00	\$_	0.00
	5.	Net income from operating a business, profession, or farm Gross receipts (before all deductions)	<b>Debtor 1</b> \$0.00	Debtor 2				
I		Ordinary and necessary operating expenses	<b>-</b> \$ <u>0.00</u>	- \$				
I		Net monthly income from a business, profession, or farm	\$0.00	\$	Copy here	\$_0.00	\$_	0.00
	6.	Net income from rental and other real property Gross receipts (before all deductions)	<b>Debtor 1</b> \$0.00	Debtor 2 \$				
I		Ordinary and necessary operating expenses	<b>-</b> \$ <u>0.00</u>	- \$				
I		Net monthly income from rental or other real property	\$0.00	\$	Copy here	\$_0.00	\$_	0.00
I	7.	Interest, dividends, and royalties				\$ 0.00	\$	0.00

B 122A-1 (Official Form 122A-1)

**Chapter 7 Statement of Your Current Monthly Income** 

btor 1		leman-Deal	Case number (if known)		
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Unem	ployment compensation		\$ 0.00	\$ 0.00	
	ot enter the amount if you contend that in the Social Security Act. Instead, list it is				
Foi	r you	\$0.00			
Foi	r your spouse	\$ <u>0.00</u>			
	ion or retirement income. Do not including the Social Security Act.	ude any amount received that was	a \$ <u>0.00</u>	\$0.00	
Do no as a v	ne from all other sources not listed a ot include any benefits received under t victim of a war crime, a crime against h ism. If necessary, list other sources on	he Social Security Act or payments umanity, or international or domesti	received ic		
	Long Term Disability		\$ <u>1,051.00</u>	\$_0.00	
		<del></del>	\$ 0.00	\$ 0.00	
Tota	al amounts from separate pages, if any.		+\$	+\$	
	ulate your total current monthly inco		\$ 1,051.00	\$ 0.00	\$ 1,051.00  Total current monthly income
art 2:	Determine Whether the Means	s Test Applies to You			
. Calcu	llate your current monthly income fo	r the year. Follow these steps:			
12a.	Copy your total current monthly incom	e from line 11	Co	py line 11 here 👈	\$ 1,051.00
	Multiply by 12 (the number of months	in a year).		_	<b>x</b> 12
12b.	The result is your annual income for the	nis part of the form.		12b.	\$ 12,612.00
Color	ulate the median family income that a	annling to you. Follow those stone		_	
	-	OH	7		
FIII III	the state in which you live.	On			
Fill in	the number of people in your househol	d. 1		_	
	the median family income for your state			13.	\$ 48,596.00
To fin instru	nd a list of applicable median income an actions for this form. This list may also b	nounts, go online using the link spe e available at the bankruptcy clerk'	ecified in the separate 's office.		
How	do the lines compare?				
14a.	Line 12b is less than or equal to line Go to Part 3.	e 13. On the top of page 1, check b	ox 1, There is no presumptior	n of abuse.	
14b. 🕻	Line 12b is more than line 13. On the Go to Part 3 and fill out Form 122A-		presumption of abuse is deter	rmined by Form 122A	-2.
	Sign Below				
art 3:					d correct
art 3:	By signing here, I declare under pen	alty of perjury that the information o	on this statement and in any a	ttachments is true an	u correct.
art 3:	4	alty of perjury that the information o	on this statement and in any a	ttachments is true an	u correct.
art 3:	By signing here, I declare under pen  /s/ Dina Coleman-Deal  Signature of Debtor 1	alty of perjury that the information o		ttachments is true an	u correct.
art 3:	★ /s/ Dina Coleman-Deal	alty of perjury that the information o	*		u correct.
art 3:	/s/ Dina Coleman-Deal Signature of Debtor 1 Date01/18/2019		Signature of Debtor 2		u correct.